

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	01/22/01
FORMALITY REVIEW	H-S	866	02-06-001
RESPONSE FORMALITY REVIEW	HA	858	05/01/01

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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